PRO209 561

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DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Intertace for supplying power	r to a load	from an electrical power	supply network.
•	·	-	
the application of which is attached hereto	OR		
I hereby state that I have reviewed and u by any amendment specifically referred to		ntents of the above identified application	on, including the claims, as amended
I acknowledge the duty to disclose in continuation-in-part application(s), mater the national or PCT international filing data	rial information w	hich became available between the fi	
I hereby claim foreign priority benefits u or plant breeder's rights certificate(s), or than the United States of America, listed patent, inventor's or plant breeder's right application on which priority is claimed.	365(a) of any Police 1 below and have	CT international application(s) which also identified below, by checking the	designated at least one country other ne box, any foreign application(s) for
Prior Foreign Application Number(s) 0209561	Countr FRANCE	Foreign Filing Date 26.07.2002	Priority Claimed Yes No XX
I hereby claim domestic priority benefits States provisional application(s), or §360 insofar as the subject matter of each of International application in the manner p to disclose any information material to t filing date of the prior application and the	5(c) of any PCT lof the claims of rovided by the fire patentability o	States Code §120 of any United States International application(s) designation this application is not disclosed in st paragraph of Title 35, United State f this application as defined in 37 C.I	g the United States, listed below and, a listed prior United States or PCT s Code, §112, I acknowledge my duty F.R. 1.56 which occurred between the
Prior U.S. or International Application Nu	mber(s)	U.S. or International Filing Date	Status

I hereby appoint all attorneys of SUGHRUE MION, PLLC who are listed under the USPTO Customer Number shown below as my attorneys to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, recognizing that the specific attorneys listed under that Customer Number may be changed from time to time at the sole discretion of Sughrue Mion, PLLC, and request that all correspondence about the application be addressed to the address filed under the same USPTO Customer Number.

ADDID
PATENT TRADEMARK OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:						
Given NameCESTER Christophe (first and middle [if any])		Family Name or Surname				
Inventor's Signature Cx	1	Date	12th August 2003			
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NAME OF SECOND INVENTOR	;					
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature	1		Date	· .		
Residence: City	State	Country		Citizenship		
Mailing Address:						
City	State	Zip		Country		
NAME OF THIRD INVENTOR:		<u> </u>	······································			
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature			Date	-		
Residence: City -	State	Country		Citizenship		
Mailing Address:						
City	State	Zip	· .	Country		
NAME OF FOURTH INVENTOR	<u>- </u>					
Given Name (first and middle [if any])		Family Name or Surname				
Inventor's Signature		Date				
Residence: City	State	Country		Citizenship		
Mailing Address:						
City	State	Zip	·	Country		
NAME OF FIFTH INVENTOR:						
Given Name (first and middle [if any]) Family Name or Surname						
Inventor's Signature			Date			
Residence: City	State	Country		Citizenship		
Mailing Address:						
City	State	Zip		Country		